Customer No. 035884

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PATENT

Attorney Docket: 2080-3-18

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In re application of:
> Doo Sang Pak

Serial No: 09/844,821
Filed: April 27, 2001
For: INFORMATION DISPLAY APPARATUS AND DISPLAY
METHOD OF THE SAME

Art Unit: 2142

Examiner: Ailes, Benjamin A.

Confirmation No.: 3336

Mail Stop AF
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Supplemental Amendment in the above-identified application.

☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

☒ A petition for extension of time for __2__ month(s) is enclosed.

☒ Request for Continued Examination is enclosed.

☐ An information disclosure statement in accordance with 37 CFR 1.56 and 1.97 is enclosed.

☐ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM $ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	22	-	22	**	0	LG=$50 SM=$25	$50	$ 0
INDEPENDENT CLAIMS FEE	3	-	3	***	0	LG=$200 SM=$100	$200	$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS						LARGE ENTITY FEE = $290 SMALL ENTITY FEE = $145		$ 0
							TOTAL	$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please apply the filing fee in the amount of $_____ to Deposit Account No. 50229.

☒ Please apply the extension fee of $_450__ to Deposit Account No. 502290.

☐ Please apply the RCE filing fee of $_790__ to Deposit Account No. 502290.

☐ Please apply the IDS filing fee in the amount of $_____ to Deposit Account No. 502290.

☐ Please apply the petition fee in the amount of $_____ to Deposit Account No. 502290.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 502290.

> ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

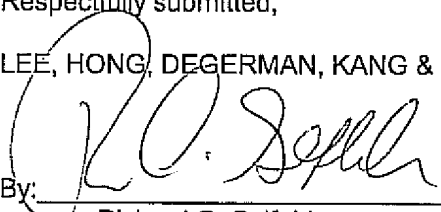> ☒ Any patent application processing fees under 37 CFR 1.17.

Date: June 29, 2006

Respectfully submitted,

LEE, HONG, DEGERMAN, KANG & SCHMADEKA

By: _____

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